PTO/SB/22 (06-09)
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U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

PETITION FOR EXTENSION OF TIME UNDER	Docket Number (Docket Number (Optional)				
FY 2009 (Fees pursuant to the Consolidated Appropriations Ac	1	RAP-815				
Application Number 10/611,604-Con				Filed July 1, 2003		
For PHARMACY AUTOMATED ACCOUNTS RECEIVABLE SYSTEM AND METHODS						
Art Unit 3686		Examiner	A. L. Alts	schul		
This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.						
The requested extension and fee are as follows (chec	k time period desired	and enter the approp	priate fee bel	low):		
	<u>Fee</u>	Small Entity Fe	<u>:e</u>			
x One month (37 CFR 1.17(a)(1))	\$130	\$65	\$	130.00		
Two months (37 CFR 1.17(a)(2))	\$490	\$245	\$			
Three months (37 CFR 1.17(a)(3))	\$1110	\$555	\$			
Four months (37 CFR 1.17(a)(4))	\$1730	\$865	\$			
Five months (37 CFR 1.17(a)(5))	\$2350	\$1175	\$			
Applicant claims small entity status. See 37	CFR 1.27.					
A check in the amount of the fee is enclosed						
X Payment by credit card.						
The Director has already been authorized to	charge fees in this	application to a Der	nosit Accour	nt.		
The Director is hereby authorized to charge Deposit Account Number 13-2855	any iees willon may	be required, or cred	it any overp	payment, to		
WARNING: Information on this form may become Provide credit card information and authorization	public. Credit card inf	formation should not l	pe included o	n this form.		
I am the applicant/inventor.	1011 P 10-2036.					
assignee of record of the entire interest. See 37 CFR 3.71.						
Statement under 37 CFR			3).			
x attorney or agent of record. Registration Number 64,514						
attorney or agent under 37 CFF	R 1.34.					
Registration number if acting under 37 CFR 1.34						
Silian 47icht		Augı	ust 3, 2009			
Signature			Date			
Lilian Y. Ficht Typed or printed name) 474-6300			
Typed or printed name Telephone Numb NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multip						
NOTE: Signatures of all the inventors or assignees of record of the than one signature is required, see below.	entire interest or their repre	sentative(s) are required.	Submit multiple f	forms if more		
Total of 1 forms are submitted.						

I hereby certify that this paper (along with any paper refer	red to as bein	ng attached or enclosed) is being transmitted via the Office electronic filing
system in accordance with § 1.6(a)(4).		V11 / /-
Dated: August 3, 2009	Signature	Lilian 11-51/2 Villan V Cialin